EPI Update for Friday March 18, 2005

Center For Acute Disease Epidemiology

Iowa Department of Public Health

Items for this week's EPI Update include:

- Histoplasmosis and Bird Droppings
- UHL Pertussis Testing Guidelines Frequently Asked Questions
- World TB Day March 24th, 2005
- FDA Advisory: Certain Soft Cheeses Made from Raw Milk
- Meeting Announcements and Training Opportunities

Histoplasmosis and Bird Droppings

Recently there have been some newspaper articles reporting on the enormous numbers of birds that congregate in trees in downtown areas of certain cities and towns in Iowa. A few of these articles have raised concern that the build up of bird excrement on sidewalks and windowsills might be a risk for histoplasmosis for those who live or work nearby, as well as for those involved with cleanup.

Histoplasmosis is caused by a fungus known as *Histoplasma capsulatum*. Histoplasmosis is not actually found in the excrement of birds and birds do not appear to become infected. Rather, excrement from birds can act as a nutrient or "food" for the spores of *H. capsulatum* already present in the soil to grow. Bird droppings on surfaces such as sidewalks and windowsills have not been shown to be a health risk for acquiring histoplasmosis. Soil that has accumulated under bird roosts and around buildings where birds have resided for significant periods of time can be contaminated with *H. capsulatum*.

Anyone can become infected with histoplasmosis. Positive histoplasmin skin tests occur in as many as 80 percent of the people living in areas where *H. capsulatum* is common, such as the eastern and central United States. Infants, young children, and older persons, in particular those with chronic lung disease, are at increased risk for severe disease. Disseminated disease is more frequently seen in people with cancer or AIDS. Most cases of histoplasmosis occur in people who have stirred up soil that has been contaminated with bird excrement or who have been exposed to dirt in old houses or construction sites that is disturbed. Fortunately, most individuals infected with histoplasmosis have no apparent ill effects and do not develop any clinical symptoms.

So, although birds may be a nuisance and make our sidewalks unattractive with the excrement they leave behind, we won't be exposed to the organism that causes histoplasmosis this way. Because it is not usually practical to test or decontaminate most sites that may be contaminated with *H. capsulatum*, the following precautions can be taken to reduce a person's risk of exposure:

- Avoid areas that may harbor the fungus, e.g., accumulations of bird or bat droppings.
- Before starting a job or activity having a risk for exposure to *H. capsulatum*, consult the NIOSH/NCID Document Histoplasmosis: Protecting Workers at Risk http://www.cdc.gov/niosh/pubs.html. This document contains information on work practices and personal protective equipment that will reduce the risk of infection.

For more information, visit the CDC's website on histoplasmosis at: http://www.cdc.gov/ncidod/dbmd/diseaseinfo/histoplasmosis_g.htm

UHL Pertussis Testing Guidelines - Frequently Asked Questions

UHL and IDPH have worked together to create a document that addresses frequently asked questions about the pertussis testing guidelines. This resource can be found on IDPH's website on the Pertussis Information page:

 $\underline{<} \underline{http://www.idph.state.ia.us/adper/pertussis.asp>} \ . \ Clicking \ on \ the \ link \ below \ will \ take \ you \ directly \ to \ the \ document.$

http://www.idph.state.ia.us/common/pdf/immunization/pertussis_uhl_faq.pdf

World TB Day - March 24th, 2005

TB Elimination: Now Is the Time!

World TB Day, held on March 24 each year, is an occasion for people around the world to raise awareness about the international health threat presented by tuberculosis (TB). It is a day to recognize the collaborative efforts of all countries involved in fighting TB. TB can be cured, controlled, and, with diligent efforts and sufficient resources, eventually eliminated.

History of World TB Day

In the late 19th century, TB killed one out of every seven people living in the United States and Europe. On March 24, 1882, Dr. Robert Koch announced the discovery of the TB bacillus. At the time, his discovery was the most important step taken towards the control and elimination of this deadly disease.

In 1982, a century after Dr. Koch's announcement, the first World TB Day was sponsored by the World Health Organization (WHO) and the International Union Against Tuberculosis and Lung Disease (IUATLD). The event was intended to educate the public about the devastating health and economic consequences of TB, its effect on developing countries, and its continued tragic impact on global health.

Where We Are Now

TB remains a threat to the health and well being of people around the world. Among infectious diseases, TB remains the second leading killer of adults in the world, with more than 2 million TB-related deaths each year. Until TB is controlled, World TB Day won't be a celebration. But it is a valuable opportunity to educate the public about the devastation TB can spread and how it can be stopped.

TB in Iowa

In Iowa in 2004 there were 47 cases of TB diagnosed. All infectious cases of TB (pulmonary and /or laryngeal) require a contact investigation conducted by the local health department. In 2004, 24 of the 47 cases required contact investigations and 826 individuals were identified as having had close contact with an infectious patient. Close contacts must be investigated when the initial case is suspected or diagnosed and again 10-12 weeks after the last known contact with the infectious patient. Contacts are evaluated to determine if they:

- Have TB disease so that they can be treated and the spread of disease can be stopped
- Have latent TB infection (LTBI) so that they can be given LTBI treatment
- Are at high risk for developing TB disease and may need treatment for LTBI until it becomes clear whether they have TB infection (HIV +, children < 4 years of age)

Additionally, TB was ruled out in 150 patients and 1,693 individuals were treated for latent TB infection.

Iowa remains one the lowest incident states in the nation with a rate of 1.6 cases of TB per 100,000 persons compared to the national average of 4.9 cases per 100,000. 66 percent of Iowa's cases occurred in non-US born persons, which is reflective of national trends.

IDPH provides antibiotics to treat all latent TB infections, as well as all suspect or active cases. Directly observed therapy (DOT), where a nurse watches the patient swallow every dose, is the standard of care for infectious suspected/active cases. In Iowa, local public health departments perform DOT and also carry out the close contact investigations. They received \$25 per DOT visit from IDPH for this service. Iowa is one of the few states in the nation where funding is provided to local health departments for this work.

More information and resources related to World TB Day can be found at: http://www.cdc.gov/nchstp/tb/WorldTBDay/2005/default.htm

FDA Health Advisory - Certain Soft Cheeses Made from Raw Milk

The FDA is advising that certain soft cheeses made from raw milk present a health risk, particularly to certain high-risk groups, such as pregnant women, newborns, older adults, and people with weakened immune systems. There is some risk even to healthy people who consume these cheeses. Consumption of raw milk cheeses has been associated with several serious infections including listeriosis, brucellosis, salmonellosis, and tuberculosis. The raw milk cheeses of most concern originate from Mexico and Central America and some types that have been implicated include Queso Panela, Asadero, Blanco, and Ranchero. These types of cheeses are particularly popular among those in the Hispanic community so practitioners that serve Hispanic populations in Iowa may want to alert their clients and patients to the potential risks and also keep this in mind in patients who present with symptoms of any of the above diseases.

The FDA is recommending that people not eat any unripened raw milk soft cheeses from Mexico, Nicaragua, or Honduras. They also recommend that consumers not purchase or consume raw milk cheeses from sources such as flea markets, sellers operating door-to-door or out of their trunks. This would also include cheeses made at individual's homes.

Meeting Announcement and Training Opportunities:

Protecting the Food Supply from Intentional Adulteration: An Introductory Training to Raise Awareness

This training was developed jointly by the USDA's Food Safety and Inspection Service, Food and Nutrition Service and Agricultural Marketing Service and HHS Food and Drug Administration. The training is targeted at individuals that play an important role in defending our nation's food from attack such as food industry regulators at all levels and nutrition assistance program operators and administrators. However, individuals who would be essential in responding to a food emergency due to an intentional attack, such as law enforcement, public health and homeland security are also encouraged to participate. The free online course is available at:

http://www.fda.gov/ora/training/orau/FoodSecurity/default.htm

Rabies: Replacing Fear with Facts

A brochure detailing the April 5, 2005 teleconference titled, "Rabies: Replacing Fear with Facts" is available at

http://www.uhl.uiowa.edu/newsroom/upcomingevents/nltnrabies/rabies.pdf. The conference is jointly sponsored by the University Hygienic Laboratory, NLTN, Iowa Department of Public Health, Veterinary Diagnostic Lab-ISU, and the CDC.

The teleconference's primary audience is comprised from physicians and veterinarians who, after the teleconference, will understand: basic rabies epidemiology and infection;

- Decision-making regarding animal quarantine vs. euthanasia;
- How to submit appropriate specimens and test request forms to local laboratories;
- Testing conducted for rabies at local laboratories; and
- Prescribing post-exposure prophylaxis.

The University Hygienic Laboratory appreciates your cooperation and interest. For further information please the Hygienic Lab's Training and Outreach Coordinator, Beth Hochstedler, at 319-335-4303. To register online please go to: http://www.uhl.uiowa.edu/newsroom/upcomingevents/nltnrabies/registration.html>

Have a healthy and happy week! Center for Acute Disease Epidemiology Iowa Department of Public Health 800-362-2736